oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN BRACKEN

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 754434

Entity Name: THE HACIENDAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

151 CYPRESS WAY, EAST NAPLES, FL 34110

Current Mailing Address:

151 CYPRESS WAY EAST #E103 NAPLES, FL 34110 US

FEI Number: 65-0233948

Name and Address of Current Registered Agent:

BRACKEN, SUSAN 151 CYPRESS WAY EAST #E103 NAPLES, FL 34110 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: SUSAN BRACKEN		1	1/03/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	т	Title	DIRECTOR	
Name	BOYCE, WALTER	Name	PARMENTIER, CYNTHIA	
Address	368 SLATER ST	Address	32-1150 ST. ANNES RD	
City-State-Zip:	OTTAWA K1R 5C1	City-State-Zip:	WINNIPEG, MANITOBA R2N 0E	3
Title	PD	Title	S	
Name	BRACKEN, SUSAN	Name	MUIR, BARBARA	
Address	151 CYPRESS WAY E. #E103	Address	151 CYPRESS WAY E. #E101	
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110	
Title	VP			
Name	GRIFFIN, NANCY			
Address	151 CYPRESS WAY EAST C103			
City-State-Zip:	NAPLES FL 34110			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

PRESIDENT

FILED Nov 03, 2016 Secretary of State CC0218482432

Certificate of Status Desired: No

11/03/2016

Date